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<b>SERIAL NUMBER</b> 10/635,449	<b>FILING OR 371(c) DATE</b> 08/07/2003 <b>RULE</b>	<b>CLASS</b> 370	<b>GROUP ART UNIT</b> 2616	<b>ATTORNEY DOCKET NO.</b> T3653-8792US09
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**\*\* CONTINUING DATA \*\*\*\*\*** *Yes*  
 This application is a DIV of 10/189,212 07/05/2002 ABN which is a DIV of 09/573,816 05/17/2000 PAT 6,549,520  
 which is a CON of 09/485,614 02/11/2000 PAT 6,266,348  
 which is a 371 of PCT/US98/21442 10/09/1998  
 which claims benefit of 60/061,689 10/10/1997  
 and claims benefit of 60/071,701 01/16/1998  
 and claims benefit of 60/072,450 01/26/1998  
 and claims benefit of 60/072,986 01/21/1998

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*** *No*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
**\*\* 11/03/2003**

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	<b>STATE OR COUNTRY</b> MA	<b>SHEETS DRAWING</b> 7	<b>TOTAL CLAIMS</b> 1	<b>INDEPENDENT CLAIMS</b> 1
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**ADDRESS**  
62574

**TITLE**  
Splitterless multicarrier modem

<b>FILING FEE RECEIVED</b> 880	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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